PTO/SB/06 (08-03)
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Unde	, i PATE	NT APPI ICA	TION I	トトト ひとしらん	MINALION	RECORD	mation unles	Application	or Docket Num	ber 3
CLAIMS AS FILED - PART I							VTITY	OR	OTHER SMALL E	
(Column 1)						RATE	FEE	[RATE	FEE
ASIC	FOR NUMBER FILED NUMBER EXTRA ASIC FEE						<i>.395</i>	OR		.190
37 CFR 1.16(a))						x . 9 =		OR	x s 8 =	.:
37 CF	FR 1.16(c))		minus 20 =		ļ .			OR'	x \$85 =	i
NDEPENDENT CLAIMS 37 CFR 1.16(b)) minus 3 =			= •		× 44 =			200		
(ULT	TPLE DEPENDEN	T CLAIM PRESENT	(37	CFR 1.16(d))		+ s <u>120</u> =		OR	+\$ 200 =	
ff th	e difference in col	lumn 1 is less than	zero, ent	er "0" in column 2		TOTAL	<u> </u>	OR'	TOTAL [<u> </u>
	CLAIMS AS AMENDED - PART II						•	OTHER	THAN	
	(Column 1) (Column 2) (Column 3)				(Column 3)	SMALL E	NTITY	OR	SMALL	
∀	9/24/4	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total /	AMENDMENT	Minus	PAID FOR	=	x.9=		OR	x \$ /8 =	·
	(37 CFR 1.16(c))		Minus	" 0	=	///	-	OR	x \$88 =	
	(37 CFR 1.16(b))			Ψ	L	X FIG		1	200	1
٤	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$\frac{45U}{2} =		OR	TOTAL	herri t.
•						ADD'L FEE		OR	ADD'L FEE	L
		(Column 1)		(Column 2)	(Column 3)		·	٦ .		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	x s_ <u>4</u> =		OR	x 1/8 =	
ᅙ	(37 CFR 1.16(c)) Independent	•	Minus	***	=	x s 44 =	·	OR	x \$ <u>88</u> =	·
Ä	(37 CFR 1.16(b))			ENTERIAL 137 CI	ER 1.16(d))	+./5/)=		OR	+,300=	ļ
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)			_		
 		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
ENDMENT	Total	AMENDMENT	Minus	PAID FOR	=	x 5 9 =		OR	x s 18 =	
	(37 CFR 1.16(c))		Minus	***	=	× s44 =		OR	x \$ <u>\$8</u> =	<u> </u>
	(37 CFR 1.16(b))	<u> </u>	1	<u> </u>		150	 	OR	+ \$300 =	
AEN.		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				=/XC/2+1 I	1			+
AMEN		TATION OF MULTIP	LE DEPEN	DENT CLAIM (37 C		TOTAL		OR	TOTAL ADD'L FEE	

"If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

"If the "Highest Number Previously Paid For (IN THIS SPACE is less than 3, enter "3".

"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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